PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number		
APPLICATION AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY									OR	OTHER THAN OR SMALL ENTITY	
	FOR	NUME	ER FILED	NUMBI	UMBER EXTRA		RATE (\$)	FEE (\$)	1	RATE (\$)	FEE (S)
	SIC FEE SFR 1.16(2), (0), or (d)									
SEA	RCH FEE SFR 1.16(k), (7), or (n								1		
EXAMINATION FEE (37 CFR 1.16(0), (p), or (d)											
TOTAL CLAIMS		***		1.	·		X £		OR	x =	
(37 CFR 1.16(1)) INDEPENDENT CLAIMS		MS	minus 20						<u>۳</u>		
(37 (CFR 1.16(h))	If the spe	minus 3 :	nd drawings e	exceed 100		X =		1	X =	
FEE	LICATION SIZE : CFR 1.16(s))	sheets of is \$250 (additional	f paper, the \$125 for sm il 50 sheets	application sinal entity) for or traction the G) and 37 CFI	ze fee due each ereof. See		·				
MULTIPLE DEPENDENT CLASM PRESENT (37 CFR 1.16(II))											
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	
APPLICATION AS AMENDED - PART II											
6	6-9-06 (Column 1) (Column 2) (Column 3)						SMALL (ENTITY	OR	OTHER THAN SMALL ENTITY	
MENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADOI- TIONAL FEE (\$)		RATE (\$)	ADOI- TIONAL FEE (\$)
	Total (37 CPR 1.16(1))	21	Minus	23	* D		х =		OR	*50·	
Q.	Independent Q7 CFR 1.16(h))	.71	Minus '	4J	10		χ =		OR	×701)=	
ME	Application Size Fee (37 CFR 1.16(s))										V
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,16(j))								OR		
					*		TOTAL ADO'L FEE		OR	TOTAL ADD'L FEE	
<u> </u>		(Column 1)	· · · · · ·	(Column 2)	(Column 3)						
4 B	7/17/20	CLAIMS REMAINING AFTER AMENDMENT	,	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (S)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
ΛĒ	Total (37 OFR 1.16(1))	· 21.	Minus	~ <i>2</i> /2	- 1		x =		OR	x =	1
AMENDMENT	Independent (37 CFR 1.16(h))	• 71	Minus	4	Ε		х =	1	OR	x =	
ME	Application Size	Fee (37 CFR 1,1	16(s))						1		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,16(j))								OR		
						-	TOTAL ADD'L FEE		OR	TOTAL ADO'L FEE	
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".											

The Trignest number Previously Paid For "(Total Fishest than 3, enter" ".

The "Highest Number Previously Paid For" (Total for "(Total for Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application, Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.